

Florida Department of State Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000122511 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : NELSON & ASSOCIATES, C.P.A., P.A.

Account Number : I20120000083

Phone Fax Number : (305)593-0829 : (305)593-8744

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: YNELSON@TAXNELSON.COM

COR AMND/RESTATE/CORRECT OR O/D RESIGN JMS COPIERS, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$35.00 |

Electronic Filing Menu

Corporate Filing Menu

4140001225113

Articles of Amendment to Articles of Incorporation of

| JMS COPIERS, INC. | | | | |
|---|---|---|-------------|-----------|
| (Name of Corporation as currently filed | with the Florian Dept. of Sta | to) | | |
| P08000034094 | | | _ | |
| (Document Number of Co | orporation (if known) | | _ | , |
| Pursuant to the provisions of section 607.1006, Florida Stills Articles of Incorporation: | tatutes, this Florida Profit Corp | oration adopts the following | ng amendme | ot (a)tne |
| A. If amending name, enter the new name of the corp | <u>oration;</u> | | | |
| | | | _The new | ų |
| name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the above | "Inc," or "Co". A profession | "incorporated" or the a al corporation name must | hbreviation | |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE | 2 <u>27</u> 2.) | | - | |
| | <u></u> | | _ | |
| C. Enter new mailing address, if applicable; | | | - | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | . ••• =: | |
| | | | | |
| | | | <u>.</u> සි | (T) |
| D. If amonding the registered agent and/or registered new registered agent and/or the new registered offi | office address in Florida, ente ice address: | er the name of the | . E | J |
| Name of New Registered Agent | | | 53 | |
| | (Florida street address) | | | |
| New Registered Office Address: | | _, Florida_ | | |
| | (Cip) | (Zip Code) | _ | |
| New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I an | n familiar with and accept the c | obligations of the position. | | |
| Signature of New I | Registered Agens, if changing | <u> </u> | | |

Page 1 of 4

Example:

H140001225113

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director: TR = Trustec; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| X Change | <u>PT</u> | John Doe | |
|-------------------------------|-----------|-------------|---------------------------------------|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | Address |
| 1) Change | V | GARVIN CHOY | 3045 DOLPHIN DRIVE |
| Add | | | MIRAMAR, FL 33025 |
| Remove | | | |
| 2) Change | | | |
| Add | | | · · · · · · · · · · · · · · · · · · · |
| Remove | | | · |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

Page 2 of 4

H140001225113

| Attoch additional sheets, if necessary). | icles, enter change(s) here: (Be specific) |
|--|---|
| | |
| | |
| | |
| <u> </u> | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| <u> </u> | |
| | |
| | |
| | |
| | |
| | • |
| | |
| | |
| · | |
| | |
| | |
| f an amondment provides for an exch | nange, recinssification, or cancellation of issued shares, and ment if not contained in the amondment itself: |
| (if not applicable, indicate N/A) | Manufil- 11 not contained in the alternative Userli |
| · | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

No. 3750 P. 5 H140001225113

| The date of each amendment(s) adoption: MAY 21, 2014 | if other than the |
|--|-------------------|
| date this document was signed. | |
| Effective date if applicable; MAY 21, 2014 | |
| (no more than 90 days after umendment file date) | |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. | |
| The amendment(s) was/vere approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by" | |
| (voting group) | |
| The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. | |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | |
| Dated MAY 21, 2014 | |
| Signature Harris | |
| (By a director, president or other officer — if directors or officers have not been selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | _ |
| MARIANO KATZ | |
| (Typed or printed name of person signing) | _ |
| PRESIDENT | |
| (Title of person signing) | _ |